

MOUNTAINS RECREATION & CONSERVATION AUTHORITY

Los Angeles River Center and Gardens 570 West Avenue Twenty-six, Suite 100 Los Angeles, California 90065 Phone (323) 221-9944 Fax (323) 221-9934

Agreement for Individual Voluntary Services

Name:		
Address:		
Telephone: Work:	Home:	
Emergency Contact: Name:	Phone:	
Brief description of work to be perform	ned including minimu	um time commitment required:
Assist in:	at _	Canyon/Park.
I agree to comply with applicable labor laws. not receive any compensation for the above with SMMC/MRCA employee for any purpose other that volunteer service is not creditable for lear understand that either the SMMC/MRCA or I party. I agree to provide the SMMC/MRCA with requested.	work and that I will NOT er than tort claims and in we accrual or any other of may cancel this agreem	be considered to be an ijury compensation and I understand employee benefits. I also ent at any time by notifying the other
Signature		_Date
Accepta	nce for SMMC/MRC	A
The SMMC/MRCA agrees, while this agreem facilities as are available and needed to perfovolunteering under this agreement as an age compensation of work related injuries.	rm the work described a	above and to consider the individual
(Signature of Volunteer C	Coordinator)	(Date)
Termin	nation of Agreement	
Agreement Terminated on(Da	te) (Signa	ture of Volunteer Coordinator)